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CONFIRMATION NO. 3724

SERIAL NUMBER 10/642,638	FILING OR 371(c) DATE 08/19/2003 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. 3659-70
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APPLICANTS

Howard R. Levin, Teaneck, NJ;
 Mark Gelfand, New York, NY;
 John O'Mahony, Hackensack, NJ;
 Hans-Dietrich Polaschegg, Koestenberg, AUSTRIA *GA*

** CONTINUING DATA *****

This application is a DIV of 09/618,759 07/18/2000 PAT 6,890,315 which claims benefit of 60/206,232 05/23/2000 *10 July 07*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
 11/12/2003 *none GA*

** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NJ	SHEETS DRAWING 6	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 10
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ADDRESS

23117

TITLE

Method and apparatus for peripheral vein fluid removal in heart failure

FILING FEE RECEIVED 1148	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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